Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 1 of 57

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Silvia First name Middle name Zepeda	Jose First name A. Middle name Zepeda
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8163	xxx-xx-5566

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 2 of 57

Debtor 1 Silvia Zepeda
Debtor 2 Jose A. Zepeda

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	24 Winrock Rd.	If Debtor 2 lives at a different address:
		Montgomery, IL 60538 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Kendall	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 3 of 57

Debtor 2 Jose A. Zepeda Case number (if known) Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ■ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Silvia Zepeda

Debtor 1

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 4 of 57

	otor 1 Silvia Zepeda otor 2 Jose A. Zepeda		Docum	Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	
	it to this petition.			ox to describe your business: ness (as defined in 11 U.S.C. § 101(27A))
				Estate (as defined in 11 U.S.C. § 101(51B))
				lefined in 11 U.S.C. § 101(53A))
				er (as defined in 11 U.S.C. § 101(6))
			☐ None of the abov	е
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	· Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	-			Number, Street, City, State & Zip Code

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 5 of 57

Debtor 1 Silvia Zepeda

Debtor 2 Jose A. Zepeda Case number (if known)

Part 5: Explain You

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Debtor 1 Silvia Zepeda Document Page 6 of 57

Deb	tor 2 Jose A. Zepeda				Case nu	ımber (if known)	
Par	6: Answer These Questi	ons for Rep	oorting Purposes				
16.	What kind of debts do you have?		Are your debts primarily cons			defined in 11 U.S.C. § 101(8) a	s "incurred by an
		I	☐ No. Go to line 16b.				
		I	Yes. Go to line 17.				
			Are your debts primarily busing money for a business or investr				
		I	☐ No. Go to line 16c.				
		I	☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	that are not consu	mer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7.	Go to line 18.			
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Dogare paid that funds will be availa			property is excluded and admin tors?	istrative expenses
	administrative expenses	1	No				
	are paid that funds will be available for distribution to unsecured creditors?	I	□ Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000)	2 5,001-50,000	
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000		□ 50,001-100,000	
	owe?	☐ 100-199 ☐ 200-999		1 0,001-25,0	000	☐ More than100,000)
19.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1	billion
	estimate your assets to be worth?	□ \$50,001	1 - \$100,000	□ \$10,000,00°		□ \$1,000,000,001 -	
			01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 · ☐ More than \$50 bill	
20.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1	billion
	estimate your liabilities to be?	□ \$50,00	1 - \$100,000	□ \$10,000,00°		\$1,000,000,001 -	
			01 - \$500,000 01 - \$1 million	□ \$50,000,00° □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 ☐ More than \$50 bi	
Par	7: Sign Below						
For	you	I have exa	mined this petition, and I declar	e under penalty of p	perjury that the i	nformation provided is true and	correct.
						gible, under Chapter 7, 11,12, or d I choose to proceed under Cha	
			ey represents me and I did not I have obtained and read the n			is not an attorney to help me fill)).	out this
		I request re	elief in accordance with the cha	pter of title 11, Unit	ed States Code,	specified in this petition.	
						ney or property by fraud in conn 20 years, or both. 18 U.S.C. §§	
		/s/ Silvia			/s/ Jose A. Z		
		Silvia Ze Signature	peda of Debtor 1		Jose A. Zep Signature of D		
		Executed of	August 31, 2016		Executed on	August 31, 2016	
			MM / DD / YYYY			MM / DD / YYYY	

	O430 10	20171 00	Document		10 20.00.40	Descrivani
Debtor 1 Debtor 2	Silvia Zepeda Jose A. Zepeda			Cas	se number (if known)	
	attorney, if you are led by one	under Chapter	7, 11, 12, or 13 of title 11, U	nis petition, declare that I have Inited States Code, and have e ify that I have delivered to the	explained the relief a	vailable under each chapter
•	not represented by ey, you do not need s page.	and, in a case		lies, certify that I have no know		
		/s/ Gerald Ba	auer Jr.	Date	August 31, 201	6
		Signature of At	torney for Debtor		MM / DD / YYYY	
		Gerald Baue	r Jr.			
		Printed name				
		Law Offices	of Gerald Bauer Jr.			
		Firm name				
		400 N. Schm	idt Rd., Ste. 207			
		Bolingbrook				
		Number, Street, City	y, State & ZIP Code			
		Contact phone 7	708-687-8000	Email address	glb@gbauerl	aw.com

6282486 Bar number & State

<u> </u>
Spouse if, filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	160,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,341.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	189,341.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	198,780.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	54,050.50
	Your total liabilities	\$	252,830.50
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,331.83
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,326.83
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
3.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sch	hedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Silvia Zepeda
Debtor 2 Jose A. Zepeda

Debtor 2 Case number (if known)

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 7,401.69

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 16	-28171	l Doc 1		08/31/16 ument	Entered 08/31/10 Page 10 of 57	6 20:30:49	Des	c Main
ill in thi	s information to	identify	your case and			- 1 mm. 10 m			
Debtor 1	Silvi	a Zeped	a						
) - l- 1 O	First Na			dle Name		Last Name			
ebtor 2 pouse, if fi		A. Zepe		dle Name		Last Name			
nited St	ates Bankruptcy	Court for	the: NORTHE	RN DIST	RICT OF ILLIN	NOIS			
								_	_
ase nun	nber					_			Check if this is a amended filing
each cat ink it fits formation	best. Be as comp	B: Pr	coperty escribe items. Lis	ble. If two	married people	an asset fits in more than one e are filing together, both are e e top of any additional pages,	equally responsible	e for supp	olying correct
		idence, Bu	uilding, Land, or C	Other Real	Estate You Ow	vn or Have an Interest In			
Do you	own or have any I	egal or eq	uitable interest in	any resid	ence, building,	land, or similar property?			
□ No. €	So to Part 2.								
Yes.	Where is the prope	ertv?							
	Winrock Rd. t address, if available,	or other desc	cription	_	Single-family h		the amount of any	secured of	ns or exemptions. Put claims on Schedule D: Secured by Property.
Мог	ntgomery	IL	60538-0000		Manufactured Land	or mobile home	Current value of entire property?	the	Current value of the portion you own?
City		State	ZIP Code		Investment pro	operty	\$160,000	0.00	\$160,000.0
				□ □ Who	Timeshare Other has an interest	t in the property? Check one		ole, tenan	ur ownership interest acy by the entireties, o
					Debtor 1 only		Joint tenant		
	ndall			_ 🛚	Debtor 2 only				
Count	ty				Debtor 1 and I	•			unity property
				Other		f the debtors and another ou wish to add about this item on number:	(see instructions	S)	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 11 of 57

vane			se number (if known)	
)	trucks, tractors, sport utility ve	hicles, motorcycles		
es				
Make:	Mitsubishi	Who has an interest in the property? Check one		ed claims on Schedule D:
Model:		,	Creditors Who Have Clair	ims Secured by Property.
		_	Current value of the	Current value of the
	nate mileage.	<u> </u>	entire property?	portion you own?
		At least one of the debtors and another		
9000		Check if this is community property (see instructions)	\$10,000.00	\$10,000.0
Make:	Mitsubishi	Who has an interest in the property? Check one	Do not deduct secured cl	
Model:	Outlander	☐ Debtor 1 only	Creditors Who Have Clair	
Year:	2007	Debtor 2 only	Current value of the	Current value of the
Approxim	nate mileage: 132k	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
n fair d	condition.	Check if this is community property (see instructions)	\$2,500.00	\$2,500.0
Make:	Honda	Who has an interest in the property? Check one	Do not deduct secured cl	
Model:	Civic	☐ Debtor 1 only	Creditors Who Have Clair	
Year:	2000	Debtor 2 only	Current value of the	Current value of the
	mate mileage.	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		At least one of the debtors and another		
n tair (condition.	Check if this is community property (see instructions)	\$1,000.00	\$1,000.0
Make:	Volkswagon	Who has an interest in the property? Check one	Do not deduct secured cl	
Model:	Beattle	Debtor 1 only	Creditors Who Have Clair	
Year:	1972	Debtor 2 only	Current value of the	Current value of the
		■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		☐ At least one of the debtors and another		
		Check if this is community property (see instructions)	\$500.00	\$500.0
	Model: /ear: Approxim Dther inf n good Make: Model: /ear: Approxim Dther inf n fair (Make: Model: /ear: Approxim Dther inf n fair (Make: Model: /ear: Approxim Dther inf n fair (Make: Model: /ear: Approxim Dther inf n fair (Model: Mirage (rear: 2015 Approximate mileage: 9k Other information: In good condition Make: Mitsubishi Model: Outlander (rear: 2007 Approximate mileage: 132k Other information: In fair condition. Make: Honda Model: Civic (rear: 2000 Approximate mileage: 99k Other information: In fair condition. Make: Honda Model: Quic 2000 Approximate mileage: 99k Other information: In fair condition.	Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only D	Microbial and interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Seproximate mileage: In good condition Check if this is community property (see instructions)

Official Form 106A/B

Dobtor 1	Silvia Zanada	Document	Page 12 of 57	
Debtor 1 Debtor 2	Silvia Zepeda Jose A. Zepeda		Case numb	er (if known)
Example ☐ No	old goods and furnishing	s ure, linens, china, kitchenware		
		s used household goods and fant value.	urnishings, nothing of	\$1,500.00
□ No	es: Televisions and radios;	audio, video, stereo, and digital equ ameras, media players, games	pment; computers, printers, scann	ers; music collections; electronic devices
		Used Toshiba LCD T.V.s, a u sed HP Laptop Computer.	sed HP Desktop Computer,	\$500.00
Example ■ No	bles of value es: Antiques and figurines; other collections, memo		ooks, pictures, or other art objects;	stamp, coin, or baseball card collections;
9. Equipme Example	ent for sports and hobbie		bicycles, pool tables, golf clubs, sl	kis; canoes and kayaks; carpentry tools;
■ No		s, ammunition, and related equipmen	nt	
□ No		leather coats, designer wear, shoe	s, accessories	
	Used c	othing.		\$200.00
☐ No		ume jewelry, engagement rings, we	dding rings, heirloom jewelry, watch	nes, gems, gold, silver
	Used je	welry including wedding ring	5.	\$500.00
□ No	rm animals bles: Dogs, cats, birds, hors Describe	es		
	Two (2)	domestic dogs.		\$1.00
14. Any oth	her personal and househo	old items you did not already list,	including any health aids you did	I not list

☐ Yes. Give specific information.....

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 13 of 57

Debtor 1 Debtor 2	•		Case number (if known)	
			rt 3, including any entries for pages you have attached	\$2,701.00
Part 4:	Describe Your Financial Ass	sets		
	own or have any legal o		iny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you have in		ne, in a safe deposit box, and on hand when you file your petitio	n
			Cash located in Debtors' possession.	\$40.00
	institutions. If you l	, or other financial accou have multiple accounts v	ints; certificates of deposit; shares in credit unions, brokerage horith the same institution, list each.	ouses, and other similar
■ Ye	S		Institution name:	
	17.	1. Credit Union	Earthmovers Credit Union	\$600.00
	17.:	2. Credit Union	Earthmovers Credit Union	\$600.00
	ds, mutual funds, or pub mples: Bond funds, invest		erage firms, money market accounts	
■ No	s	Institution or issuer na	ame:	
joint	venture	nd interests in incorpor	rated and unincorporated businesses, including an interest	in an LLC, partnership, and
■ No □ Ye	s. Give specific information	on about them Name of entity:	 % of ownership:	
Neg	otiable instruments includ -negotiable instruments a	e personal checks, cash	able and non-negotiable instruments iers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them.	
	s. Give specific informatio	n about them ssuer name:		
			3(b), thrift savings accounts, or other pension or profit-sharing p	olans
■ Ye	s. List each account sepa Typ	rately. be of account:	Institution name:	
	IR.	A	Statefarm IRA	\$7,100.00
		1/1-)	404/1-)	
	401	l(k)	401(k) with current employer	\$3,000.00

Official Form 106A/B

Entered 08/31/16 20:30:49 Case 16-28171 Doc 1 Filed 08/31/16 Desc Main Page 14 of 57 Document Debtor 1 Silvia Zepeda Debtor 2 Jose A. Zepeda Case number (if known) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund

value:

Statefarm whole life insurance with an approximate cash surrender value of \$ 1,300.00

Spouse and children

\$1,300.00

	Case 16-28171	Doc 1	Filed 08/31/16 Document	Entered 08/31/16 20:30:49 Page 15 of 57	Desc Main
Debtor 1 Debtor 2	Silvia Zepeda Jose A. Zepeda			Case number (if known)	
If you somed	are the beneficiary of a livin one has died. Give specific information			ed surance policy, or are currently entitled to rec	ceive property because
Exam _i ■ No	s against third parties, who ples: Accidents, employment Describe each claim			it or made a demand for payment s to sue	
■ No	contingent and unliquidat Describe each claim	ed claims of	every nature, including	g counterclaims of the debtor and rights t	o set off claims
□ No	nancial assets you did not Give specific information	already list			
	·	Holida	y Inn Club Vacation	s Fox River Resort Timeshare	Unknown
for P	art 4. Write that number he	ere		ny entries for pages you have attached	\$12,640.00
	own or have any legal or equi				
-	o to Part 6.	itabio intorcot	many buomeou related p		
☐ Yes. (Go to line 38.				
	escribe Any Farm- and Commo			n or Have an Interest In.	
■ No.	u own or have any legal or . Go to Part 7. s. Go to line 47.	r equitable in	terest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Dic	Not List Above	
Exam _i ■ No	u have other property of all ples: Season tickets, country	y club membe			
☐ Yes.	Give specific information				
54. Add	the dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 6

Document Page 16 of 57

Debtor 1
Debtor 2
Silvia Zepeda
Jose A. Zepeda
Case number (if known)
List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 \$160,000.00 Part 2: Total vehicles, line 5 56. \$14,000.00 Part 3: Total personal and household items, line 15 57. \$2,701.00 Part 4: Total financial assets, line 36 58. \$12,640.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

31. Part 7: Total other property not listed, line 54 + \$0.00

52. **Total personal property.** Add lines 56 through 61... \$29,341.00 Copy personal property total \$29,341.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$189,341.00

		12000000	311 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Silvia Zepeda			
	First Name	Middle Name	Last Name	
Debtor 2	Jose A. Zepeda			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is a
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Concedure PAD that hats this property	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
24 Winrock Rd. Montgomery, IL 60538 Kendall County	\$160,000.00		\$30,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2007 Mitsubishi Outlander 132k miles In fair condition.	\$2,500.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
2000 Honda Civic 99k miles In fair condition.	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	
1972 Volkswagon Beattle 72k miles In poor condition; currently not	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
running/operating. Line from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	
Various used household goods and furnishings, nothing of significant	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)
value. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Page 18 of 57 Document

Debtor 1 Jose A. Zepeda Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Two (2) Used Toshiba LCD T.V.s, a 735 ILCS 5/12-1001(b) \$500.00 \$500.00 used HP Desktop Computer, and a used HP Laptop Computer. 100% of fair market value, up to Line from Schedule A/B: 7.1 any applicable statutory limit Used clothing. 735 ILCS 5/12-1001(a) \$200.00 \$200.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Used jewelry including wedding 735 ILCS 5/12-1001(b) \$500.00 \$500.00 rinas. Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Credit Union: Earthmovers Credit** 735 ILCS 5/12-1001(b) \$600.00 \$600.00 Union Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Credit Union: Earthmovers Credit** 735 ILCS 5/12-1001(b) \$600.00 \$600.00 Union Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit IRA: Statefarm IRA 735 ILCS 5/12-1006 \$7,100.00 \$7,100.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 401(k): 401(k) with current employer 735 ILCS 5/12-1006 \$3,000.00 \$3,000.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit Statefarm whole life insurance with 735 ILCS 5/12-1001(b) \$1,300.00 \$1,300.00 an approximate cash surrender value of \$ 1,300.00 100% of fair market value, up to Beneficiary: Spouse and children any applicable statutory limit Line from Schedule A/B: 31.1 Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No П

Yes

Silvia Zepeda

		Document Pa	iae 19 c	of 57		
Fill in this	information to identify you	r case:				
Debtor 1	Silvia Zepeda					
	First Name	Middle Name Last	Name			
Debtor 2	Jose A. Zepeda					
(Spouse if, filing	g) First Name	Middle Name Last	Name			
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT OF ILLINOIS	S			
Case numb	per				☐ Check	if this is an
()					_	led filing
						iod iiiiig
Official F	Form 106D					
Schedi	ule D: Creditors	Who Have Claims Sec	cured	by Propert	V	12/15
<u> </u>	are b. or cartors	Wile Have Glaims Sec	- Car Car	by i ropert	<u> </u>	12/13
		If two married people are filing together, bo out, number the entries, and attach it to this				
number (if kr		out, number the entries, and attach it to this	5 1011II. OII ti	ie top of any addition	nai pages, write your na	nie and case
1. Do any cre	editors have claims secured by	your property?				
☐ No.	Check this box and submit the	nis form to the court with your other sche	dules. You	have nothing else t	o report on this form.	
■ Yes	. Fill in all of the information I	helow		_		
		oolow.				
	List All Secured Claims			Column A	Column B	Column C
		nore than one secured claim, list the creditor s a particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name.		Do not deduct the	that supports this	portion
2.1 Ally l	Financial	Describe the property that secures the cla	aim:	value of collateral. \$12,264.00	claim \$10,000.00	If any \$2,264.00
	r's Name	2015 Mitsubishi Mirage 9k miles		Ψ12,204.00	Ψ10,000.00	Ψ2,204.00
		In good condition				
		As of the date you file, the claim is: Check	all that			
	Renaissance Ctr	apply.	ali triat			
	oit, MI 48243	Contingent				
Number	r, Street, City, State & Zip Code	Unliquidated				
Who owes	the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1		☐ An agreement you made (such as mortga	ago or cocure	nd.		
Debtor 2	•	car loan)	age or secure	tu .		
_	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	's lien)			
_	one of the debtors and another	☐ Judgment lien from a lawsuit	,			
_	this claim relates to a	•	chase Mo	ney Security		
commu	nity debt	— Other (including a right to onset)				
	Opened					
Date debt w		Last 4 digits of account number	2057			
		-				
Holic	day Inn Club			•		
^{2.2} Vaca	tions	Describe the property that secures the cla	aim:	\$11,500.00	Unknown	Unknown
Creditor	r's Name	Holiday Inn Club Vacations Fox				
		River Resort Timeshare				
2550	N. 3653rd Rd.	As of the date you file, the claim is: Check	all that			
	idan, IL 60551	apply. Contingent				
	r, Street, City, State & Zip Code	☐ Unliquidated				
	,,,, ap 0000	☐ Disputed				
Who owes	the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1	only	☐ An agreement you made (such as mortga	age or secure	ed		
Debtor 2	only	car loan)				
Debtor 1	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	's lien)			
	one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if	this claim relates to a	Other (including a right to offset)	eshare Lo	oan		

community debt

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 20 of 57

Debtor 1	Silvia Zep	eda			Case n	umber (if know)		
	First Name	Middle N	ame Last Name					
Debtor 2		<u> </u>						
	First Name	Middle N	ame Last Name					
Date debt	was incurred	July 2016	Last 4 digits of account nun	nber <u>368</u>	88			
	tionstar Mo	rtgage LI	Describe the property that secures	the claim:	\$	175,016.00	\$160,000.00	\$15,016.00
Cred	litor's Name		24 Winrock Rd. Montgomer 60538 Kendall County	ry, IL				
) Highland I wisville, TX		As of the date you file, the claim is apply. Contingent	: Check all that	at			
Num	ber, Street, City, S	State & Zip Code	☐ Unliquidated					
Who owe	es the debt? C	check one.	☐ Disputed Nature of lien. Check all that apply.					
☐ Debtor☐ Debtor	,		☐ An agreement you made (such as car loan)	mortgage or	or secured			
Debtor	1 and Debtor 2	? only	☐ Statutory lien (such as tax lien, me	echanic's lien	n)			
☐ At leas	t one of the deb	otors and another	☐ Judgment lien from a lawsuit					
	if this claim re nunity debt	elates to a	Other (including a right to offset)	Mortgag	ge			
Date debt	was incurred	Opened 11/09	Last 4 digits of account nun	nber <u>49</u> 3	36			
Add the	dollar value of	f your entries in C	olumn A on this page. Write that nur	mber here:		\$198,780.	00	
	the last page		the dollar value totals from all pages	S.		\$198,780.	00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	Case 10-20171 L	Document	Page 21 of 57	Desc Main
Fill in this	information to identify your			
Debtor 1	Silvia Zepeda			
200101	First Name	Middle Name	Last Name	
Debtor 2	Jose A. Zepeda			
(Spouse if, filin	g) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS	
Case numb	per			
(if known)				☐ Check if this is an
				amended filing
Official I	Form 106E/F			
		ho Have Unsecured	Claims	12/15
			f claims and Part 2 for creditors with NONPRIOR	
Schedule D: left. Attach tl name and ca	Creditors Who Have Claims Sec he Continuation Page to this pag se number (if known).	ured by Property. If more space is n ge. If you have no information to rep	o not include any creditors with partially secured leeded, copy the Part you need, fill it out, numbe ort in a Part, do not file that Part. On the top of a	er the entries in the boxes on the
	List All of Your PRIORITY Un			
_ `	creditors have priority unsecure	d claims against you?		
	Go to Part 2.			
☐ Yes.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any	creditors have nonpriority unsec	cured claims against you?		
□ No. `	You have nothing to report in this p	art. Submit this form to the court with y	our other schedules.	
Yes.				
unsecur	ed claim, list the creditor separately	y for each claim. For each claim listed,	e creditor who holds each claim. If a creditor has identify what type of claim it is. Do not list claims all ave more than three nonpriority unsecured claims fi	ready included in Part 1. If more
				Total claim
4.1 A d	Ivocate Medical Group	Last 4 digits of acco	ount number 2927	\$14.00
	npriority Creditor's Name	W/h are support that all a had a		
_) Box 92523 nicago, IL 60675	When was the debt	incurred?	
	mber Street City State Zlp Code	As of the date you fi	ile, the claim is: Check all that apply	
	o incurred the debt? Check one.	•		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and and	- '	TY unsecured claim:	
	Check if this claim is for a comi	П		
del	ot	☐ Obligations arising	g out of a separation agreement or divorce that you	did not
	he claim subject to offset?	report as priority clain		
_			or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	Medical	

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 22 of 57

Debtor 1 Silvia Zepeda

Debtor	2 Jose A. Zepeda		Case number (if know)				
4.2	Bankamerica Nonpriority Creditor's Name	Last 4 digits of account number	5677	\$5,170.00			
	Po Box 982238 El Paso. TX 79998	When was the debt incurred?	Opened 10/12				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	_ '					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.3	Bk Of Amer	Last 4 digits of account number	3133	\$2,151.00			
	Nonpriority Creditor's Name Po Box 982238 El Paso, TX 79998	When was the debt incurred?	Opened 10/12				
	Number Street City State Zlp Code	As of the date you file, the claim					
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	\square Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.4	Cap1/mnrds	Last 4 digits of account number	7584	\$1,641.00			
	Nonpriority Creditor's Name		Opened 08/11				
	26525 N Riverwoods Blvd Mettawa, IL 60045	When was the debt incurred?	——————————————————————————————————————				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	og plane, and other similar debte				
	■ No						
	Yes	Other. Specify Charge Acc	Count				

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 23 of 57

Debtor	2 Jose A. Zepeda		Case number (if know)				
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	8365	\$4,282.00			
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 8/17/00				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify Credit Card	<u> </u>				
4.6	Capital One Bank Usa N	Last 4 digits of account number	9644	\$4,613.00			
	Nonpriority Creditor's Name	Opened 08/00					
	15000 Capital One Dr When was the debt incurred? Richmond, VA 23238						
	Number Street City State ZIp Code	s: Check all that apply					
	Who incurred the debt? Check one.	_					
	Debtor 1 only	Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other Specify Credit Card					
	La res	Other. Specify Oredit Card					
4.7	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	3289	\$866.00			
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 03/15				
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card	I				

Debtor 1 Silvia Zepeda

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 24 of 57

Debt	or 2 Jose A. Zepeda		Case number (if know)	
4.8	Capital One/Best Buy Nonpriority Creditor's Name	Last 4 digits of account number	6559	\$517.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/07	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset? —	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Comenity Bank/Inbryant Nonpriority Creditor's Name	Last 4 digits of account number	7382	\$178.00
	4590 E Broad St Columbus, OH 43213	When was the debt incurred?	Opened 11/09	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other circilar debte	
	■ No □ Yes	Other. Specify Charge Account of Debts to perison of profit-sharing the Debts to perison of peris		
4.1 0	Comenity Bank/valctyfr Nonpriority Creditor's Name	Last 4 digits of account number	2756	\$1,218.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 11/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	

Debtor 1 Silvia Zepeda

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 25 of 57

	1 Silvia Zepeda 2 Jose A. Zepeda		Case number (if know)	
4.1 1	Comenity Bank/vctrssec	Last 4 digits of account number	6666	\$35.00
	Nonpriority Creditor's Name Po Box 182789 Columbus OH 43318	When was the debt incurred?	Opened 09/02	
	Columbus, OH 43218 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.1	Comenitybank/meijermc Nonpriority Creditor's Name	Last 4 digits of account number	6538	\$1,856.00
	Po Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 05/11	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	l	
4.1	Empact Emergency Physicians Nonpriority Creditor's Name	Last 4 digits of account number	0396	\$33.00
	PO Box 5997 Carol Stream, IL 60197	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	. ,	
	— 103	Otner. Specify		

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 26 of 57

Jose A. Zepeda	Case number (if know)				
Guardian Anesthesia Associates	Last 4 digits of account number 1511	\$81.00			
Nonpriority Creditor's Name	Last 4 digits of account number 1511	φ01.0			
PO Box 95369	When was the debt incurred?				
Chicago, IL 60694					
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only					
☐ Debtor 1 only ☐ Debtor 2 only	Contingent				
_	Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
□ Yes	■ Other. Specify Medical				
Ilinois Collection Service	Last 4 digits of account number 3189	\$126.00			
Ionpriority Creditor's Name					
PO Box 1010	When was the debt incurred?				
inley Park, IL 60477 umber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
/ho incurred the debt? Check one.	7.6 of the date year me, the stain is. Officer an that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Student loans				
Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	■ Other. Specify Medical				
Kohls/capone	Last 4 digits of account number 8320	\$1,859.00			
Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr	When was the debt incurred? Opened 11/02				
Wenomonee Falls, WI 53051					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	\square Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Charge Account				

Debtor 1 Silvia Zepeda

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 27 of 57

Jose A. Zepeda	Case number (if know)				
Dathology Associatos of America		¢65.00			
Pathology Associates of America Nonpriority Creditor's Name	Last 4 digits of account number	\$65.00			
5700 Southwyck Blvd. Toledo, OH 43614	When was the debt incurred?				
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	□ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Medical				
Pathology Associates of America	Last 4 digits of account number 6522	\$14.00			
Nonpriority Creditor's Name	Last 4 digits of account number	V 1100			
5700 Southwyck Blvd.	When was the debt incurred?				
Toledo, OH 43614 Iumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply				
☐ Debtor 1 only	☐ Contingent				
Debtor 2 only	_				
_	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
At least one of the debtors and another	Student loans				
☐ Check if this claim is for a community ebt	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐Yes	■ Other. Specify Medical				
	■ Other. Specify				
Pathology Associates of America	Last 4 digits of account number 6539	\$2.50			
Nonpriority Creditor's Name 5700 Southwyck Blvd.	When was the debt incurred?				
Toledo, OH 43614					
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
Vho incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
lebt	lacksquare Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Medical				

Debtor 1 Silvia Zepeda

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 28 of 57

Autority Conditions Name Po Box 2091 Condingent Code (In this claim is for a community debt in claim subject to offset? Po Box 2091 Autorate Name Po Box 2091 Autorate Name Po Box 2091 Autorate Name Code (In this claim is for a community debt is the claim subject to offset? Po Box 2091 Autorate Name Code (In this claim is for a community debt is the claim subject to offset? Po Box 2091 Autorate Name Code (In this claim is for a community debt is the claim subject to offset? Po Box 2091 Autorate Name Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim is for a community debt is the claim subject to offset? Code (In this claim	1 Silvia Zepeda 2 Jose A. Zepeda	Case number (if know)	
PO Box 740397 When was the debt incurred? Cincinnati, OH 45274 As of the date you file, the claim is: Check all that apply When was the debt incurred? Contingent Uniquidated Debtor 1 and Debtor 2 only Uniquidated Debtor 2 only Uniquidated Debtor 2 only Debtor 3 and Debtor 2 only Uniquidated Debtor 2 only Debtor 3 and Debtor 3 and Debtor 4 and Debtor 5 and another Debtor 4 and Debtor 5 and another Debtor 5 and Debtor 5 and 200 Debtor 6 and Debtor 8 and Debtor 9 and 9 another 1 and 1 another 1 and 1 another 1 and 1 another 1 and 1 another 2 another 3 another 1 another 1 another 2 another 3 another 1 another 2 another 3 another 2 another 3 another 3 another 2 another 3	Quest Diagnostics	Last 4 digits of account number 5936	\$11.00
Number Street City State Zip Code Nas of the date you file, the claim is: Check all that apply Unliquidated Debtor 1 only Unliquidated Unliquida	PO Box 740397	When was the debt incurred?	
Debtor 2 only	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Other. Specify Other. Specify Medical Rush Copley Medical Group Nonpriority Creditor's Name PO Box 2091 Aurora, IL 60507 Number Street City State Zip Code Who Incurred the debt? Check one. Debtor 1 and Debtor 2 only Yes Rush Copley Medical Group Aurora, IL 60507 Number Street City State Zip Code No place of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 2 only Aurora, IL 60507 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Aurora, IL 60507 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 teleast one of the debtors and another Check if this claim is for a community debt Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 teleast one of the debtors and another Check if this claim is for a community debt Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 on	Debtor 1 only	☐ Contingent	
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Check if this claim subject to offset? Contingent C	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Is the claim subject to offset? No Pess Other. Specify Medical As of the date you file, the claim is: Check all that apply When was the debt incurred? Aurora, II. 60507 Nomer Street (ity State Zip Code Who incurred the debt? Check one. Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? As of the date you file, the claim is: Check all that apply When you file, the claim is: Check all that apply When you file, the claim is: Check all that apply When you file, the claim is: Check all that apply When you file, the claim is: Check all that apply When you file, the claim is: Check all that apply When you file, the claim is: Check all that apply When you file, the claim is: Check all that apply When you file, the claim is: Check all that apply Who is the claim subject to offset? Student loans Debts to pension or profit-sharing plans, and other similar debts When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date			
Rush Copley Medical Group Autora, L. 60507 More Specify Medical			
Rush Copley Medical Group Nonpriority Creditor's Name PO Box 2091 Aurora, IL 60507 Number Street City State Zip Code Who incurred the debt? Check one. Contingent Check if this claim is for a community debt is the claim subject to offset?	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
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Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt No Yes Rush Copley Medical Group Nonpriority Creditor's Name PO Box 2091 Aurora, IL 60507 Number Street City State Zip Code Who incurred the debtors and another Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9	PO Box 2091	When was the debt incurred?	
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Aurora, IL 60507 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt In No No When was the debt incurred? As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	 	Last 4 digits of account number 7614	\$1,151.00
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Debts to pension out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	PO Box 2091	When was the debt incurred?	
Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		As of the date you file, the claim is: Check all that apply	
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		,	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	☐ Debtor 1 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	Debtor 2 only		
☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	■ Debtor 1 and Debtor 2 only		
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts		•	
Is the claim subject to offset? ■ No □ Debts to pension or profit-sharing plans, and other similar debts	☐ Check if this claim is for a community	☐ Student loans	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	debt		
☐ Yes ☐ Other. Specify _ Medical	_	• • •	
	Yes	Other. Specify Medical	

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 29 of 57

	1 Silvia Zepeda 2 Jose A. Zepeda		Case number (if know)	
4.2 3	Rush Copley Medical Group	Last 4 digits of account number	0957	\$2,499.00
	Nonpriority Creditor's Name PO Box 2091 Aurora, IL 60507	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	Sears/cbna Nonpriority Creditor's Name	Last 4 digits of account number	1745	\$7,869.00
	Po Box 6283 Sioux Falls, SD 57117	When was the debt incurred?	Opened 10/06	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.2	Syncb/hh Gregg	Last 4 digits of account number	3003	\$2,885.00
	Nonpriority Creditor's Name C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 11/11	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Charge Acc	count	

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 30 of 57

Debtor Debtor	1 Silvia Zepeda 2 Jose A. Zepeda	Document Page S	Case number (if know)		
4.2	Syncb/jc Penney Dc	Local Adicate of account mumbers	7210	\$2,513.00	
6	Nonpriority Creditor's Name Po Box 965007	Last 4 digits of account number When was the debt incurred?	Opened 07/14	φ2,313.00	
	Orlando, FL 32896	when was the debt incurred?	Opened 07/14		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify Credit Card	<u> </u>		
4.2	Syncb/oldnavydc		0818	\$3,749.00	
7	Nonpriority Creditor's Name	Last 4 digits of account number		\$3,745.00	
	Po Box 965005 Orlando, FL 32896	When was the debt incurred?	Opened 05/13		
	Number Street City State Zlp Code	As of the date you file, the claim i	s of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	<u> </u>		
4.2					
8	Syncb/pep Boys Nonpriority Creditor's Name	Last 4 digits of account number	<u>0590</u>	\$819.00	
	C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 05/11		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Charge Acc			

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 31 of 57 Debtor 1 Silvia Zepeda Debtor 2 Jose A. Zepeda Case number (if know) 4.2 Syncb/toysrusdc 1283 \$4,316.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Po Box 965005 When was the debt incurred? **Opened 03/13** Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.3 Syncb/walmart 6183 \$191.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Po Box 965024 When was the debt incurred? **Opened 12/11** El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3

Td Bank Usa/targetcred 5395 Last 4 digits of account number Nonpriority Creditor's Name Po Box 673 When was the debt incurred? **Opened 06/05** Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed

☐ At least one of the debtors and another ☐ Check if this claim is for a community

debt

Is the claim subject to offset?

■ No ☐ Yes Type of NONPRIORITY unsecured claim: ☐ Student loans

 $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

lacksquare Debts to pension or profit-sharing plans, and other similar debts Credit Card Other. Specify

Part 3: List Others to Be Notified About a Debt That You Already Listed

\$3,185.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 32 of 57

Debtor 1 Silvia Zepeda

Debtor 2 Jose A. Zepeda Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 54,050.50
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 54,050.50

			111 FAUE 33 01 37	
Fill in this infor	mation to identify your	case:		
Debtor 1	Silvia Zepeda			
	First Name	Middle Name	Last Name	
Debtor 2	Jose A. Zepeda			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3	City		State	ZIF Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.5	- C.1.,		Stato	2 5545	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	J.1.j		0.0.0	0000	

		Docume	ent Page 34 o	of <u>57</u>	
Fill in this	information to identify your	case:			
Dahtar 1	Olleda Zanada				
Debtor 1	Silvia Zepeda First Name	Middle Name	Last Name		
Debtor 2		Wilde Name	Lastivaine		
(Spouse if, filin	Jose A. Zepeda First Name	Middle Name	Last Name		
(-1 ,	3,				
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Casa numb					
Case numb (if known)					☐ Check if this is an
` ,					amended filing
					amended ming
Official	Form 106H				
		-1-1			
Sched	ule H: Your Cod	ebtors			12/15
	and case number (if known) you have any codebtors? (If	, ,		e as a codebtor.	
■ No					
☐ Yes					
□ 165					
	nin the last 8 years, have you				ates and territories include
Arizona	a, California, Idaho, Louisiana	Nevada, New Mexico, Pu	erto Rico, Texas, Wash	nington, and Wisconsin.)	
-	0 (1 0				
_	Go to line 3.				
⊔ Yes.	. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the c	th you. List the person shown reditor on Schedule D (Official edule E/F, or Schedule G to fill
(Column 1: Your codebtor			Column 2: The credito	or to whom you owe the debt
N	Name, Number, Street, City, State and Z	IP Code		Check all schedules th	at apply:
3.1	Mama			DSchedule D, line	
į.	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
(City	State	ZIP Code		
0.0				Польти в п	
3.2	Name			Schedule D, line	
'				☐ Schedule E/F, line	
				☐ Schedule G, line	
1	Number Street			_	
(City	State	ZIP Code		

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 35 of 57

Fill in this informa	tion to identify your case:	
Debtor 1	Silvia Zepeda	
Debtor 2 (Spouse, if filing)	Jose A. Zepeda	
United States Bar	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	rm 106 <u>l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/15
		-b.t4d D.b.t0\ b.dblb

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Teacher** Mechanic Include part-time, seasonal, or **Employer's name Creative World** Max Madsen Mitsubishi self-employed work. **Employer's address** Occupation may include student 3990 E. Ogden Ave. 701 Shoreline Dr. or homemaker, if it applies. Aurora, IL 60504 Aurora, IL 60504 How long employed there? 9 years 13 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

			non-f	non-filing spouse					
2.	\$	2,940.99	\$	5,080.70					
3.	+\$	0.00	+\$_	0.00					
4.	\$	2,940.99	\$_	5,080.70					

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 36 of 57

Debt Debt		Silvia Zepeda Jose A. Zepeda	_		Case	number (if known)				
					For Debtor 1			For De		
	Cop	by line 4 here	4.		\$_	2,940.99		\$	5,080.70	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	613.93		\$	1,378.48	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	-	\$	0.00	
	5c.	Voluntary contributions for retirement plans	50	Э.	\$	0.00	-	\$	152.40	
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	-	\$	0.00	
	5e.	Insurance	56	Э.	\$	0.00	-	\$	183.65	
	5f.	Domestic support obligations	5f		\$	0.00	-	\$	0.00	
	5g.	Union dues	50	g.	\$	0.00		\$	361.40	
	5h.	Other deductions. Specify:	5h	า.+	\$_	0.00	+	\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	613.93	_	\$	2,075.93	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,327.06	-	\$	3,004.77	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00		\$	0.00	
	8b.	Interest and dividends	8k		\$	0.00	_	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 80	c .	\$	0.00	=	\$	0.00	
	8d.		80	d.	\$	0.00	-	\$	0.00	
	8e.		86	Э.	\$	0.00	-	\$	0.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f 8g		\$_ \$_	0.00 0.00	_	\$ \$	0.00 0.00	
	8h.	Other monthly income. Specify:	8h	า.+	\$	0.00	+	\$	0.00	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	0.00		\$	0.00	
10	Cal	culate monthly income. Add line 7 + line 9.	10	¢		2 227 06 . 6		2 004	77 6	E 224 02
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	> _		2,327.06 + \$		3,004	= \$ _	5,331.83
11.	Incl othe Do	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not scify:	dep			•		I in <i>Sch</i> e	edule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certailies							12. \$	5,331.83
13.		you expect an increase or decrease within the year after you file this form	1?						Combin monthly	ed / income
	-	No. Yes Explain:								

Fill	in this informa	tion to identify yo	our case:			I				
	otor 1					Ch	ook i	f this is:		
Den	nor i	Silvia Zeped	a					n amended filing		
	otor 2	Jose A. Zepe	eda						ving postpetition chapte the following date:	r
(Spo	ouse, if filing)						13	expenses as or	the following date.	
Unit	ted States Bankr	ruptcy Court for the	NORTH	IERN DISTRICT OF ILLIN	OIS		M	M / DD / YYYY		
1	se number nown)									
Of	fficial Fo	rm 106J								
So	chedule	J: Your I	Exper	ises					12	2/1
Be	as complete ormation. If m	and accurate as	possible eded, atta	If two married people and the control of the contro	re filing together, be form. On the top of	oth are ed f any addi	qually	y responsible fo al pages, write y	or supplying correct your name and case	
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold							_
١.	□ No. Go to									
		s Debtor 2 live i	n a separ	ate household?						
	■ N □ Y	_	st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	ehold of De	ebtor	2.		
2.	Do vou have	e dependents?	□ No							
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state dependents				Son			4 months	□ No ■ Yes	
					Son			3	□ No ■ Yes	
									□ No	
									□ Yes □ No	
									☐ Yes	
3.	expenses o	penses include f people other tl d your depende	han □	No Yes						
exp app	imate your ex penses as of a plicable date.	date after the b	our bankro pankruptc	uptcy filing date unless y y is filed. If this is a supp	olemental S <i>chedul</i> e					
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i> Y				Your exp	enses	
4.		or home owners		ses for your residence. I	nclude first mortgage	e 4.	\$_		1,541.71	
	If not includ	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	4b. Prope	rty, homeowner's				4b.	\$		0.00	
		maintenance, re owner's associat		ipkeep expenses		4c. 4d.	- : -		150.00 0.00	
5.				our residence, such as ho	me equity loans		\$ -		0.00	

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 38 of 57

	tor 1 Silvia Zepeda tor 2 Jose A. Zepeda	Cooo num	abor (if known)	
טפט	tor 2 Jose A. Zepeda	Case nulli	nber (if known)	
6.	Utilities:	_	_	
	6a. Electricity, heat, natural gas	6a.	·	200.00
	6b. Water, sewer, garbage collection	6b.	·	245.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	·	400.00
7	6d. Other. Specify:	6d.	·	0.00
7. 8.	Food and housekeeping supplies Childcare and children's education costs		\$ \$	825.00
o. 9.	Clothing, laundry, and dry cleaning		\$ 	500.00
	Personal care products and services	9. 10.	·	175.00 125.00
11.	•	11.		200.00
	Transportation. Include gas, maintenance, bus or train fare.		Ψ	200.00
	Do not include car payments.	12.	\$	390.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	•	
	15a. Life insurance	15a.		80.00
	15b. Health insurance	15b.	· -	0.00
	15c. Vehicle insurance	15c. 15d.	·	136.00
16	15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	13u.	Φ	0.00
10.	Specify:	16.	\$	0.00
17.	Installment or lease payments:			0.00
	17a. Car payments for Vehicle 1	17a.	\$	209.12
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report a		Φ.	0.00
4.0	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)). ^{18.}	·	0.00
19.	Other payments you make to support others who do not live with you.	40	\$	0.00
20	Specify: Other real property expenses not included in lines 4 or 5 of this form or on Sci	19.		
20.	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	·	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify: IRA monthly contribution	21.	+\$	100.00
20				
22.	Calculate your monthly expenses 22a. Add lines 4 through 21.		\$	E 226 92
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2)	\$	5,326.83
		<u>-</u>	·	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	5,326.83
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,331.83
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	5,326.83
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	5.00
	The result is your <i>monthly het inconfle</i> .		-	
24.	Do you expect an increase or decrease in your expenses within the year after For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?			ase or decrease because of a
	■ No.			
	☐ Yes. Explain here:			
				

Elling this info						
FIII IN this into	ormation to identify your	Case:				
Debtor 1	Silvia Zepeda	ACT III AT			_	
Dahtar 2	First Name	Middle Name	Las	st Name		
Debtor 2 (Spouse if, filing)	Jose A. Zepeda First Name	Middle Name	Las	st Name		
United States I	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINO	IS		
Case number						
(if known)						☐ Check if this is an
						amended filing
O#:=:=! ==	100Daa					
	<u>rm 106Dec</u>			_		
Declara	ition About a	ın Individua	I Debt	or's	Schedules	12/15
f two married	people are filing togethe	r, both are equally resp	onsible for s	upplyir	ng correct information.	
You must file t	his form whenever you fi	le bankruptcy schedule	es or amende	ed sche	edules. Making a false st	atement, concealing property, or
			nkruptcy cas	e can r	esult in fines up to \$250	,000, or imprisonment for up to 20
years, or both.	18 U.S.C. §§ 152, 1341, 1	519, and 35/1.				
Si	gn Below					
Did you p	pay or agree to pay some	one who is NOT an atto	orney to help	you fil	II out bankruptcy forms?	,
				•		
■ No						
□ Yes.	Name of person				Attach B	ankruptcy Petition Preparer's Notice,
						ion, and Signature (Official Form 119)
Under ner	nalty of perjury, I declare	that I have read the sur	mmary and s	chadul	les filed with this declar:	ation and
	are true and correct.	that i have read the sai	illinal y alla s	oncaa	es mea with this acolare	and and
V //O:			v			
	Ivia Zepeda a Zepeda		^		ose A. Zepeda A. Zepeda	
	ture of Debtor 1				ture of Debtor 2	
- 9				- 3		
Date	August 31, 2016			Date	August 31, 2016	

Fill	in this inforn	nation to identify you	r case:			
Del	btor 1	Silvia Zepeda				
D-1	h4 0	First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	Jose A. Zepeda First Name	Middle Name	Last Name		
Uni	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Ca	se number					
(if kr	nown)				_	heck if this is an mended filing
Of	ficial Fo	rm 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/16
info	rmation. If m		attach a separate sheet to		equally responsible for suppy y additional pages, write you	
		,	arital Status and Where You	ı Lived Before		
1.	What is you	current marital statu	ıs?			
	■ Married□ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	t all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	1.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Pai	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	l amount of income yo	u received from all jobs and	ng a business during this you all businesses, including part e together, list it only once ur		dar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$18,352.41	■ Wages, commissions, bonuses, tips	\$41,296.02
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 41 of 57

Silvia Zepeda Debtor 1 Jose A. Zepeda Debtor 2 Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$36,559.23 \$62,168.34 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$33,688.00 \$61,914.00 Wages, commissions. Wages, commissions. (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... paid still owe Sears/cbna August 2016, July \$660.00 \$7,869.00 ■ Mortgage Po Box 6283 2016, and June ☐ Car Sioux Falls, SD 57117 2016 Credit Card ☐ Loan Repayment ☐ Suppliers or vendors

□ Other

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 42 of 57

Silvia Zepeda

Det	ptor 2 Jose A. Zepeda			Cas	e number (<i>if known</i>)	
7.	Within 1 year before you filed for ba Insiders include your relatives; any ger of which you are an officer, director, pe a business you operate as a sole prop alimony.	neral partne erson in con	rs; relatives of any gentrol, or owner of 20% of	neral partners; partne or more of their voting	erships of which y g securities; and a	ou are a general any managing ag	partner; corporation ent, including one fo
	■ No□ Yes. List all payments to an inside	er.					
	Insider's Name and Address	Da	ates of payment	Total amount paid	Amount you still owe	Reason for the	nis payment
В.	Within 1 year before you filed for bainsider? Include payments on debts guaranteed			yments or transfer a	iny property on a	account of a del	ot that benefited an
	■ No □ Yes. List all payments to an inside	er					
	Insider's Name and Address	Da	ates of payment	Total amount paid	Amount you still owe	Reason for the Include credite	
Par	rt 4: Identify Legal Actions, Repos	sessions, a	nd Foreclosures				
9.	Within 1 year before you filed for ba List all such matters, including persona modifications, and contract disputes.						
	■ No □ Yes. Fill in the details.						
	Case title Case number	Na	ature of the case	Court or agency		Status of the	case
10.	Within 1 year before you filed for ba Check all that apply and fill in the detail		vas any of your prop	erty repossessed, f	oreclosed, garni	shed, attached,	seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.						
	Creditor Name and Address		escribe the Property		Date	1	Value of the property
			plain what happene				
11.	Within 90 days before you filed for be accounts or refuse to make a payme. No			cluding a bank or fir	ianciai institutio	n, set off any an	nounts from your
	☐ Yes. Fill in the details.						
	Creditor Name and Address	De	escribe the action th	e creditor took	Date take	action was	Amount
12.	Within 1 year before you filed for ba court-appointed receiver, a custodia			erty in the possess	ion of an assign	ee for the benef	it of creditors, a
	■ No □ Yes						
Par	rt 5: List Certain Gifts and Contribu	utions					
13.	Within 2 years before you filed for b	ankruptcy,	did you give any gif	ts with a total value	of more than \$6	00 per person?	
	Yes. Fill in the details for each gif Gifts with a total value of more than per person		Describe the gifts	3	Date the	es you gave	Value
	Person to Whom You Gave the Gift Address:	and			uie (girto	

Debtor 1

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 43 of 57

Silvia Zepeda

more than \$600 Charity's Name Address (kumber, sixed, City, State and ZIP Code) Charity's Name Address (kumber, sixed, City, State and ZIP Code)		btor 1 Silvia Zepeda btor 2 Jose A. Zepeda	Case num	nber (if known)	
Gifts or contributions to charities that total more than \$500 Charity's Name Address (Name, Street, City, State and ZIP Code) Part 6: List Certain Losses	14.	No		total value of more than	\$600 to any charity?
15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaste or gambling? No Ves. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss		more than \$600 Charity's Name	·		Value
or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred No	Par	rt 6: List Certain Losses			
Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Date of your loss	15.		iptcy or since you filed for bankruptcy, did you lose	anything because of thef	t, fire, other disaster,
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers		_ 110			
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Access Counseling, Inc. 633 W. 5th St., Ste. 2601 Los Angeles, CA 9001 Los Angeles, CA 9001 accesscounseling.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Date payment or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property Date payment or transfer was payment transferred Amount or transfer was payment			Include the amount that insurance has paid. List pending	ng loss	Value of property lost
consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? No Yes, Fill in the details. Person Who Was Paid Amount of transfer was Payment	Par	rt 7: List Certain Payments or Transfers	s		
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bollingbrook, IL 60440 glb@gbauerlaw.com Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bollingbrook, IL 60440 glb@gbauerlaw.com Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bollingbrook, IL 60440 glb@gbauerlaw.com Access Counseling, Inc. 633 W. 5th St., Ste. 26001 Los Angeles, CA 90071 accesscounseling.com Transfer was made Amount or transfer was made \$25.00 credit counseling class August 2016 \$25.00 \$25.00 credit counseling class	16.	consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	preparing a bankruptcy petition?		rty to anyone you
400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Gerald Bauer Jr. 400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Access Counseling, Inc. 633 W. 5th St., Ste. 26001 Los Angeles, CA 90071 accesscounseling.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or transfer was payment Or transfer was payment Or transfer was payment Or transfer was payment		Person Who Was Paid Address Email or website address	transferred	or transfer was	Amount of payment
400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440 glb@gbauerlaw.com Access Counseling, Inc. 633 W. 5th St., Ste. 26001 Los Angeles, CA 90071 accesscounseling.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property or transfer was payment or transfer was payment		400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440	\$1,500.00 Atty Fees	August 2016	\$1,500.00
633 W. 5th St., Ste. 26001 Los Angeles, CA 90071 accesscounseling.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Address Description and value of any property transfer was payment or transfer was payment		400 N. Schmidt Rd., Ste. 207 Bolingbrook, IL 60440	\$335.00 Filing Fee	August 2016	\$335.00
promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ■ No □ Yes. Fill in the details. Person Who Was Paid Description and value of any property Address Date payment or transfer was payment or transfer was payment payment or transfer was payment payment or transfer was payment pa		633 W. 5th St., Ste. 26001 Los Angeles, CA 90071	\$25.00 credit counseling class	August 2016	\$25.00
☐ Yes. Fill in the details. Person Who Was Paid Address Description and value of any property Armount of transfer was payment payment armount of transfer was payment	17.	promised to help you deal with your cree	ditors or to make payments to your creditors?	pay or transfer any prope	rty to anyone who
Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was payment		_ 110			
		Person Who Was Paid		or transfer was	Amount of payment

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 44 of 57

Debtor 1 Silvia Zepeda
Debtor 2 Jose A. Zepeda

Case number (if known)

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your but include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa de as security (such as the	i irs? he granting of a se				
	Person Who Received Transfer Address Person's relationship to you	Description and vo		Describe any proper payments received or paid in exchange		Date transfer was nade	
19.	 9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 						
	Name of trust	Description and v	alue of the prope	rty transferred		Date Transfer was	
Par	t 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Stora	age Units			
20.	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 						
		Last 4 digits of account number	Type of account instrument	or Date account closed, sold, moved, or transferred		Last balance before closing or transfer	
21.	 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities cash, or other valuables? No Yes. Fill in the details. 						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommoder, State and ZIP Code)		escribe the contents		Do you still have it?	
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	place other than your	home within 1 ye	ar before you filed for	bankruptcy?		
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the contents		Do you still have it?	
Par	t 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that some for someone. No Yes. Fill in the details.	eone else owns? Inclu	ide any property <u>y</u>	you borrowed from, are	e storing for,	or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe the property		Value	
	t 10: Give Details About Environmental Infor						
-or	the purpose of Part 10, the following definition	is apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 45 of 57

Debtor 1 Silvia Zepeda
Debtor 2 Jose A. Zepeda

Case number (if known)

	toxic substances, wastes, or material into the regulations controlling the cleanup of these s		lwater, or	other medium, including s	tatutes or	
	Site means any location, facility, or property at to own, operate, or utilize it, including dispos		aw, whet	her you now own, operate,	or utilize it or used	
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, con	onmental law defines as a hazardous	waste, h	azardous substance, toxic	substance,	
Rep	ort all notices, releases, and proceedings that	you know about, regardless of when	they occ	curred.		
24.	Has any governmental unit notified you that y	ou may be liable or potentially liable	under or	in violation of an environm	nental law?	
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ronmental law, if you v it	Date of notice	
25.	Have you notified any governmental unit of a	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ronmental law, if you v it	Date of notice	
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envi	ronmenta	al law? Include settlements	and orders.	
	■ No					
	☐ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature o	of the case	Status of the case	
Par	t 11: Give Details About Your Business or C	onnections to Any Business				
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have an	y of the f	ollowing connections to an	y business?	
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either ful	I-time or part-time		
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnershi	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing exec	cutive of a corporation				
	☐ An owner of at least 5% of the voting or equity securities of a corporation					
	No. None of the above applies. Go to Pa	rt 12.				
	Yes. Check all that apply above and fill in	n the details below for each business	3.			
	Address	Describe the nature of the business Name of accountant or bookkeeper		ployer Identification number not include Social Security		
		·	Dat	es business existed		
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	y, did you give a financial statement t	o anyone	about your business? Incl	lude all financial	
	■ No					

Part 12: Sign Below

Name

I have read the answers on this *Statement* of *Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Date Issued

lacksquare Yes. Fill in the details below.

Address (Number, Street, City, State and ZIP Code) Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 46 of 57

Silvia Zepeda Debtor 1 Jose A. Zepeda Debtor 2 Case number (if known) are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Silvia Zepeda /s/ Jose A. Zepeda Jose A. Zepeda Silvia Zepeda Signature of Debtor 1 Signature of Debtor 2 Date August 31, 2016 Date August 31, 2016 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 47 of 57

Fill in this info	rmation to identify your	case:		
Debtor 1	Silvia Zepeda			
Debtor 2	First Name Jose A. Zepeda	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States B	Bankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	_
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 100			
		n for Indiv	viduals Filing Under Cha	optor 7
Stateme	in or intentio	ii ioi iiiaiv	viduals Filing Under Cha	apter 7 12/15
If you are an inc	dividual filing under cha	pter 7, you must fil	l out this form if:	
creditors ha	ve claims secured by yo	ur property, or		
	ased personal property a		ot expired. you file your bankruptcy petition or by the d	late set for the meeting of creditors
which			e time for cause. You must also send copies	
	people are filing togethe and date the form.	r in a joint case, bo	th are equally responsible for supplying cor	rect information. Both debtors must
J				
	e and accurate as possib your name and case nur		s needed, attach a separate sheet to this for	n. On the top of any additional pages,
Part 1: List	Your Creditors Who Hav	e Secured Claims		
1. For any cred information b		art 1 of Schedule D	: Creditors Who Have Claims Secured by Pr	operty (Official Form 106D), fill in the
Identify the c	creditor and the property t	hat is collateral	What do you intend to do with the proper secures a debt?	ty that Did you claim the property as exempt on Schedule C?
Creditor's	Ally Financial		☐ Surrender the property.	□ No
name:	•		Retain the property and redeem it.	
Description of	of 2015 Mitsubishi M	irana 9k milas	Retain the property and enter into a	Yes
property	In good condition	nage 3k iiiies	Reaffirmation Agreement. Retain the property and [explain]:	
securing deb	ot:		— Retail the property and [explain].	
Creditor's	Holiday Inn Club Vac	ations	Surrender the property.	□ No
name:			Retain the property and redeem it.	- Y
Description of	of Holiday Inn Club V	/acations Fox	☐ Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property	River Resort Time		Retain the property and [explain]:	
securing deb	t:		1 1 2 2 2 1 2 1	
Creditor's	Nationator Martes		П 0	Пи
name:	Nationstar Mortgage	LI	☐ Surrender the property.☐ Retain the property and redeem it.	□ No
			Retain the property and enter into a	■ Yes
Description of			Reaffirmation Agreement.	
property	60538 Kendall Co	unty	☐ Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 48 of 57

Debtor 1 Silvia Zepeda Debtor 2 Jose A. Zepeda	Case number (if known)
securing debt:	
	in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill nexpired leases are leases that are still in effect; the lease period has not yet ended. the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated m property that is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal
X /s/ Silvia Zepeda	X /s/ Jose A. Zepeda
Silvia Zepeda Signature of Debtor 1	Jose A. Zepeda Signature of Debtor 2

Date

Date

August 31, 2016

August 31, 2016

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-28171 Doc 1 Filed 08/31/16 Entered 08/31/16 20:30:49 Desc Main Document Page 53 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In	Silvia Zepeda re Jose A. Zepeda		Case No.				
	Jose A. Zepeua	Debtor(s)	Chapter	7	_		
			NEW EOD DI	EDWOD (C)			
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR DI	EBTOR(S)			
1.	rursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal services, I have agreed to accept		\$	1,500.00			
	Prior to the filing of this statement I have received		\$	1,500.00			
	Balance Due			0.00			
2.	\$335.00 of the filing fee has been paid.						
3.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
4.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
5.	■ I have not agreed to share the above-disclosed compe	nsation with any other person	unless they are mem	bers and associates of my law firm	1.		
	☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name						
5.	In return for the above-disclosed fee, I have agreed to ren	der legal service for all aspects	s of the bankruptcy	ease, including:			
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to regreaffirmation agreements and application 	ment of affairs and plan which is and confirmation hearing, an educe to market value; exe	may be required; d any adjourned hea	rings thereof;			
7.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.						
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in			
	August 31, 2016	/s/ Gerald Bauer .	Jr.				
Date			Gerald Bauer Jr. 6282486 Signature of Attorney				
		Law Offices of Ge	erald Bauer Jr.				
		400 N. Schmidt R Bolingbrook, IL 6					
		708-687-8000					
		glb@gbauerlaw.c Name of law firm	om				
		<i>мате ој taw jirm</i>					

United States Bankruptcy Court Northern District of Illinois

In re	Silvia Zepeda Jose A. Zepeda		Case No.			
	<u></u>	Debtor(s)	Chapter	7		
	VE	ERIFICATION OF CREDITOR MA		29		
		Number of C	reditors			
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of m (our) knowledge.					
Date:	August 31, 2016	/s/ Silvia Zepeda Silvia Zepeda Signature of Debtor				
Date:	August 31, 2016	/s/ Jose A. Zepeda				
		Jose A. Zepeda				
		Signature of Debtor				

Advocate Medical Group PO Box 92523 Chicago, IL 60675

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Bankamerica Po Box 982238 El Paso, TX 79998

Bk Of Amer Po Box 982238 El Paso, TX 79998

Cap1/mnrds 26525 N Riverwoods Blvd Mettawa, IL 60045

Capital One 15000 Capital One Dr Richmond, VA 23238

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Capital One/Best Buy Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Comenity Bank/Inbryant 4590 E Broad St Columbus, OH 43213

Comenity Bank/valctyfr Po Box 182789 Columbus, OH 43218

Comenity Bank/vctrssec Po Box 182789 Columbus, OH 43218 Comenitybank/meijermc Po Box 182789 Columbus, OH 43218

Empact Emergency Physicians PO Box 5997 Carol Stream, IL 60197

Guardian Anesthesia Associates PO Box 95369 Chicago, IL 60694

Holiday Inn Club Vacations 2558 N. 3653rd Rd. Sheridan, IL 60551

Illinois Collection Service PO Box 1010 Tinley Park, IL 60477

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Nationstar Mortgage Ll 350 Highland Dr Lewisville, TX 75067

Pathology Associates of America 5700 Southwyck Blvd. Toledo, OH 43614

Quest Diagnostics PO Box 740397 Cincinnati, OH 45274

Rush Copley Medical Group PO Box 2091 Aurora, IL 60507

Sears/cbna Po Box 6283 Sioux Falls, SD 57117 Syncb/hh Gregg C/o Po Box 965036 Orlando, FL 32896

Syncb/jc Penney Dc Po Box 965007 Orlando, FL 32896

Syncb/oldnavydc Po Box 965005 Orlando, FL 32896

Syncb/pep Boys C/o Po Box 965036 Orlando, FL 32896

Syncb/toysrusdc Po Box 965005 Orlando, FL 32896

Syncb/walmart Po Box 965024 El Paso, TX 79998

Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440